Request for Review Delaware State Planning Coordination

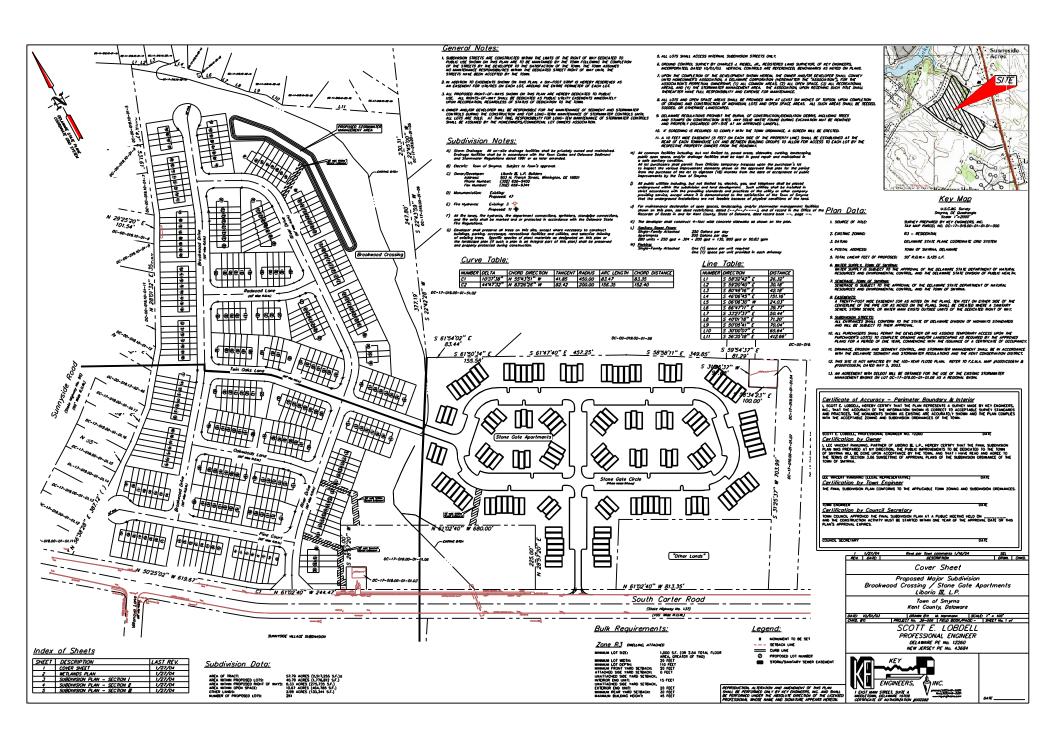
540 S. DuPont Highway • Dover, DE 19901 • Phone: 302-739-3090 • Fax: 302-739-6958

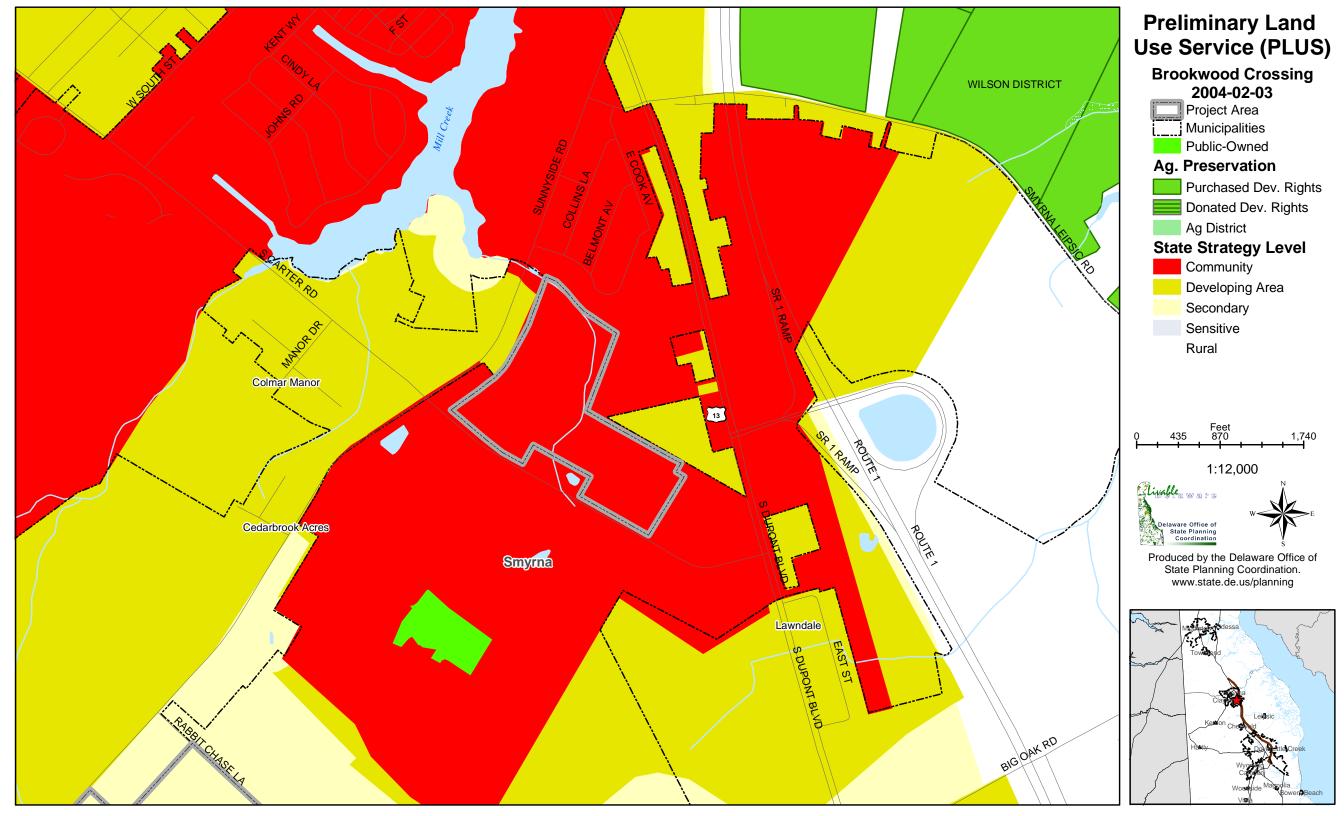
Please complete this "Request for Review" in its entirety. This form will enable the state staff to review the project <u>before</u> scheduling a meeting and to have beneficial information available for the applicant and/or developer at the time of review. If you need assistance or clarification, please call the State Planning Office at (302) 739-3090.

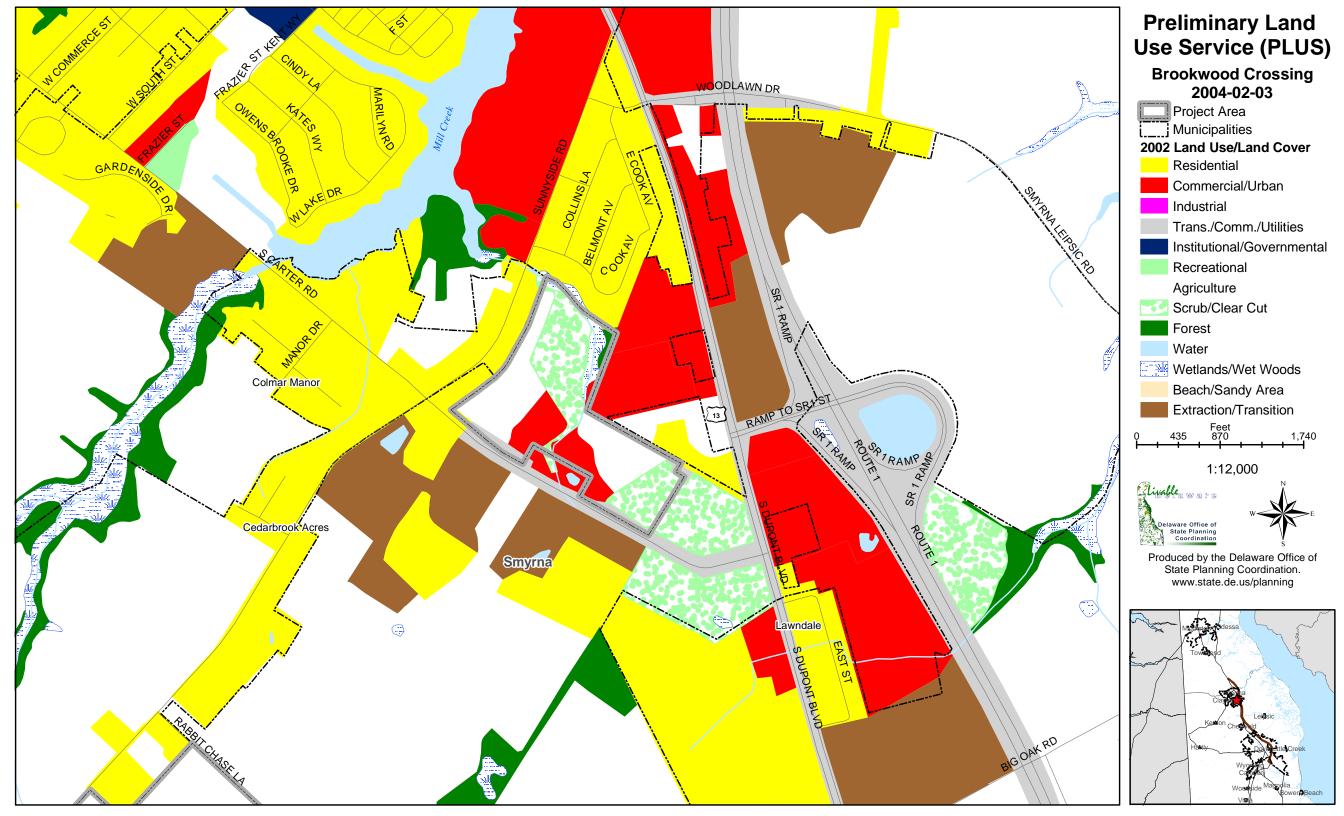
you	Theed assistance of clarification, prec	ise can the state i lamin	ig O	mee at (502) 757	, 3070.			
1.	Project Title/Name: Brookwood Crossing/Stone Gate Apartments							
2.	Location: South Carter Road, Town	cation: South Carter Road, Town of Smyrna						
3.	Parcel Identification #: DC-17-019.0	00-01-01.01	4.	County or Local	Jurisdiction Name: Town of Smyrna			
5.	Owner's Name: Liborio III, L.P.							
	Address:							
	City: Wilmington	State: DE			Zip: 19801			
	Phone: 302-656-9400	Fax: 302-656-9344			Email:			
6.	Applicant's Name: SAME AS OWNER							
	Address:							
	City:	State:			Zip:			
	Phone:	Fax:			Email:			
7.	Engineer/Surveyor Name: Key Engineers, Inc. c/o Scott Lobdell, P.E.							
	Address: 1 E. Main Street							
	City: Middletown	State: DE			Zip: 19709			
	Phone: 302-449-0520	Fax: 302-449-0521			Email: slobdell@keyengineers.com			
8.	Please Designate a Contact Pers	on for this Project: Sco	tt L	obdell & Lee Ra	amunno (for Liborio)			

Information Regarding Site:								
9.	Area of Activities (Acres +/-): 57		Yes	□ No				
10.	Is the application in compliance with the State Strategies M	lap?		□ No				
11.	Any previous applicants?		Yes	⊠ No				
12.	Present Zoning: R-3 13. Proposed Zon		ng: R-3					
14.	Present Use: Vacant Land 15. Proposed Use		: Townhouse/Apartments					
16.	Comprehensive Plan recommendation:							
17.	Existing Sanitary Facilities							
18.	Water: Central	On-Site	⊠ Pub	lic				
	Service Provider Name: Town of Smyrna							
19.	Sewer: Central	☐ On-Site	⊠ Pub	lic				
	Service Provider Name: Town of Smyrna							
20.	If a site plan please indicate square footage:							
21.	If a subdivision: Commercial		□ Residential					
22.	Number of Lots: 281& 304 Apartments							
23.	% of Impervious Surfaces: 40%	Square Feet:						
24.	If a subdivision: Density of Project: 4.	29	Number of Lots: 281					
25.	Are there Flood Plain impacting this site? If so, please include this information on the site map.							
26.	Will the site impact wetlands?		⊠ Yes	□ No				
	If yes, please define type: Forested Source of Information: Plans & Report# 199700446							
27.	s the activity impacting any perennial streams, lakes or other natural bodies of water?		⊠ Yes	□ No				
	If yes, please list name: Unnamed tributary of Lake Como							
28.	Does this activity encroach on or impact any conservation of	ditch?	Yes	⊠ No				
	If yes, please list name:							
29.	Any developer funding for infrastructure improvement antic	ipated? Yes						

30.	Are any environmental mitigation measures included or anticipated with this project?	Yes	⊠ No				
	If yes, please describe:						
31.	Will this project generate additional traffic?		□ No				
	Estimated: 3900 trips/day						
32.	Are you aware of any impact this project will have on historic resources? No						
33.	Are you aware of any environmental impact this project will have? No						
34.	Is this activity located within the State's mapped critical resources or environmentally sensitive sites?	Yes	⊠ No				
	If yes, please List them:						
35.	Will this project generate any solid waste or require any special permits within State agencies to the best of your knowledge?	☐ Yes	⊠ No				
	If yes, please List them:						
36.	Please make note of the time-line for this project: Construction in Spring/Summer 2004						
Thank you for this input. Your request will be researched thoroughly. Please be sure to note the contact person so we may schedule your request in a timely manner.							
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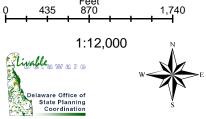
Preliminary Land Use Service (PLUS)

Brookwood Crossing 2004-02-03

2002 False-Color InfraRed Orthophotography



Municipalities



Produced by the Delaware Office of State Planning Coordination. www.state.de.us/planning

